TAL CLA				rani i								
R	lims		CLAIMS AS FILED - PART (Column 1)					small en Type [		OR	OTHER THAN SMALL ENTITY	
			14				1	RATE	FEE		RATE	FEE
AL CHA			NUMBER	FILED	NUMB	ER EXTRA	·	BASIC FEE	355.00	OB	BASIC FEE	710.00
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